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RYAZAN' OBLAST SANITATION SERVICE IMPROVED

Xe. Boytsov, Scientific Collaborator
Inst for Organization of Pub Health Acad
Med Sci USSR

The first sanitation-epidemiological stations in Ryazan' Oblast were organized in Sasovkiy, Shilov, Ransenburg, and Ryazh rayons in 1939. During the war the sanitation-epidemiological network doubled and the study of cytimum methods for controlling epidemics in the particular areas was begun.

At present, there are 57 new sanitation-epidemiological stations being built. The whole network has been strengthened by the assignment of 25 physicians from local institutes. Before these physicians are assigned to a station they are given a 3-week indoctrination course in which they are familiarized with the duties of a sanitation physician.

The Ryazh Rayon station is located in a two-story building and has a well-equipped laboratory divided into bacteriological, serological, nutritional and clinical departments. The station is the headquarters for a widely spread net of individual specialists known as "sanitarnyy aktiv" (sanitation vigilantes) who are located in every village and populated point.

A comprehensive educational program is also being conducted by the personnel of the Ryazh Station. Frequent lectures are given to the people of the region, and even the staff of the station attend periodic seminars to improve their knowledge of the most effective means of combating epidemics. It is claimed that this program had much to do with the fact that there was not one serious outbreak of infectious disease in the region during 1948.

The activity of the sanitarnyy aktiv in Chernav Rayon is given as the reason for an almost complete elimination of infectious diseases there.

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Good work has been done in Ryazan' in the control of malaria. In 1948, 1,500 hectares of anophelengenic water reservoirs were treated, 31,000 hectares of swamp ground were dusted, and 11,000 possible breeding grounds were eliminated. Similar progress has been made in the control of parasitic diseases. Plans for 1949 call for complete elimination of certain types of infectious diseases and a noticeable decrease in the number of cases in others.

At present, such a program would be difficult to put into effect since many of the stations are not equipped properly. Many do not have their own buildings and are short of transportation and laboratory equipment.

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